ENTRY BLANK—PLEASE TYPE OR PRINT #13

Ms./Artist	and	rey S	Kvodo	(last name last)
Permanent Address	290 Street	Elm	st.	(last name last) OBULIN City
4407 Zip	14 0	Daytime Tel. (216) area	775-017
Temporary or Studio Address		Street		City
				Oity
Zip		Daytime Tel. (area	
If you do not pre Reserve, in which Collaborator (if a	h county whe			he Western
If May Show ent Artist will pic Museum shou Museum shou	k up at Muse uld dispose o	eum. of.		
	Street			
City	- 25	State		Zip
Special Instr	uctions			
Entry Blank mus will not be accep		ed in full and	signed; forn	ns received unsigned
When necessary displaying an ob-		tructions or a	drawing fo	r assembling and
	the Museum up by the da	shall disposates given her	e for its own ein. It is als	n account any ob- so understood that
The submission artist of all term				ceptance by the
Signature /	udrey	ski	uodu)
I have received t	he unsold/ur	accepted obj	ect(s) in goo	od condition.
Signature	1 1 1		The last to be	

ENTRY BLANKS

Detach entire portion along dotted line and submit with slides, but retain tags

		S. M. Land				
	Paintings Sculpture		☐ Graphics ☐ ☐ Crafts		Photography (specify category)	
Materials used (me				(0)	outly dutogoty,	
aenflie		camo	an			
Title Dance	Dust	uch				
Price or NFS	e or NFS Insurance		Value Size /		O'X 6' width x depth	
(GRAPHICS A	AND PHOTO	OGRAP	HY ONLY		
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Price or NFS	Insurance If NFS C	nsurance Value If NFS Only		Size 6 X 6/ height x width x depth		
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Additional No. For Sale	Total	Total No. in Edition		Price of Frame		
ACCEPTED	DO NOT IN THIS S	CONTRACTOR OF THE PARTY OF THE	ACC	CEPTED	RECEIVED	
NOT ACCEPTED	134	1(1)	NOT A	CCEPTED	DATE	